Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Effective October 1, 2005												
		CLAIMS A		S FILED - PART (Column 1)		(Column 2)		SMALL ENTITY TYPE		OF		R THAN L ENTITY
TOTAL CLAIMS			123	123		·		ATE	FEE	7	RATE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		IC FEE	385.0	0 OF		<del>                                     </del>
TOTAL CHARGEABLE CLAIMS			23,	23minus 20=		. 3		9=	·	OR	X\$18=	as
INDEPENDENT CLAIMS			3,	minus 3 =			X	43=		OR	Voc	13/
М	ULTIPLE DEPE	NDENT CLAIM F	PRESENT	•				45=		7		
• [1	f the differenc	e in column 1 is	less than :	zero, enter	"0" in	"0" in column 2		TAL		OR		0211
	(	CLAIMS AS	AMENDE	MENDED - PART II					<u> </u>			THAN
(Column 1)				(Colum		(Column 3)	SM	ALL	ENTITY	OR		ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	RA	ŢΕ	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
NON	Total		Minus			=	×s	9=		OR	X\$18=	
AME	Independent	*	Minus	***	<u> </u>	=	X4	3=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE				PENDENT	CLAIM		+14	5=		OR	+290=	
								DTAL		ا'	TOTAL	<b></b>
		ADDIT.	FEE L	<del></del>		ADDIT. FEE	L					
		(Column 1) CLAIMS		(Colum		(Column 3)	<del> </del>	-	ADDI	7 (		
5 L		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	JSLY	PRESENT EXTRA	RAT	re .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL _FEE
	Total	* ·	Minus	**		= .	· X\$	9=		OR	X\$18=	٠٠.
	Independent	*	Minus	***		=	X43	= '.	•	OR	X86=	
	FINOT PRESE	NTATION OF ML	JUIPLE DEI	PENDENIC	LAIM		+145	j=		OR	+290=	
							.то	TAL	<del></del>		TOTAL	•
(Column 1) (Column 2) (Column 3)								FEE <b>L</b>	· · · · ·	Α	DDIT. FEE	
اد		CLAIMS REMAINING AFTER		HIGHES NUMBE PREVIOU	ST .	PRESENT EXTRA	RAT		ADDI- IONAL		RATE	ADDI- TIONAL
<u> </u>	Total	AMENDMENT	Minus	PAID FO	R ·	_			FEE			FEE
	ndependent	•	Minus	***		=	X\$ 9	=		OR	X\$18=	
7 H	FIRST PRESENTATION OF MULTIPLE						X43=			OR	X86=	
										OR	+290=	
11 1	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							AL EE	·	OR A	TOTAL DIT. FEE	
Th	ne *Highest Numb	per Previously Paid	For* (Total or	o opace is le Independent)	is the h	3, enter "3." nighest number			priate box	•		